								Application or Docket Number					
	PATENT A	ON RECOR	(D	1	0/6	25	00	15					
		······································	tive Janua						2255	Šį,	.007	moul	
	Y Y			(Column 1)		(Column 2)		SMALL ENTITY TYPE		OR	OTHER SMALL		
_	OTAL CLAIMS		2				RA	ſΕ	FEE]	RATE	FEE	
FO	IR		NUMBER	FILED	NUMB	BER EXTRA	BASIC	FEE	375.00	OR	BASIC FEE	750.00	
-	TAL CHARGE			minus 20=		5-		9=		OR	X\$18=	ari	
├ ─	DEPENDENT CI			inus 3 =	(0)		X42=			OR	X84=	7	
ΜU	LTIPLE DEPEN	NDENT CLAIM PI	RESENT				+14	0=		OR	+280=		
* If	the difference	e in column 1 is	less than ze	ero, enter	"0" in c	column 2	TOT			OR	TOTAL	240	
~	-1, /e	LAIMS AS A	MENDEL) - PAR	T II			•]~.	OTHER	THAN	
7	141)	(Column 1)		(Colum	nn 2)	(Column 3)	SMA	LL	ENTITY	OR	SMALL		
MENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA	RAT	Œ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	. //	Minus	2	5	=/	X\$ 9	9=		OR	X\$18=		
AM	Independent	ENTATION OF MI	Minus	***	C Alba	7	X42	!=		OR	X84=		
L	FIRST FILLS	INTATION OF THE	JUINE OF	PNUEN	CLAIM		+140)=		OR	+280=		
	•										TOTAL ADDIT, FEE		
_		(Column 1)		(Colum		(Column 3)	ADDIT.	FEL,			AUU11.1 C.		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	•	Minus .	**		=	X\$ 9)=		OR	X\$18=		
AME	Independent	*	Minus	***		-	X42	=		OR	X84=		
Ш	FIRST PHESE	NTATION OF MU	JLTIPLE DEP	ENDENI	CLAIM		1100				200_		
					•		+140)= TAL		OR	+280= TOTAL		
					7		ADDIT.			OR ,	ADDIT. FEE		
		(Column 1) CLAIMS		(Colum		(Column 3)		 -					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**			X\$ 9	=		OR	X\$18=		
AME	Independent	*	Minus	***		=	X42:			OR	X84=		
لنا	FIRST PRESE		 	十									
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
****	f the "Highest Nur If the "Highest Nur	mber Previously Pa mber Previously Pa	aid For" IN THIS aid For" IN THIS	S SPACE is	less than	n 20, enter "20." n 3, enter "3."	ADDIT, F	EE L			TOTAL ADDIT, FEE		
Ţ	he "Highest Num	nber Previously Paid	i For* (Total or	Independe	nt) is the	highest number fo	ound in the	e app	ropriate box	in colu	umn 1,		